

WHAT IS CLAIMED IS:

1. A method for management of health care services comprising, in combination, the steps of:
 - obtaining a plurality of individual accounts for a participant at a financial institution;
 - depositing at least a portion of a premium of the participant in each of their individual accounts;
 - predetermining authorized health care services; and
 - providing a debit card to the participant to access money in their individual accounts to make payments for the authorized health care services.
2. The method for management of health care services according to claim 1, further comprising the step of predetermining authorized health care providers which can receive payment by the debit card for the authorized health care services.
3. The method for management of health care services according to claim 2, further comprising the step of negotiating fixed payments with the authorized health care providers for the authorized health care services.
4. The method for management of health care services according to claim 1, further comprising the step of obtaining high deductible health insurance for the participant.
5. The method for management of health care services according to claim 4, further comprising the step of depositing at least a portion of the premium of the participant in one of their individual accounts for obtaining the high deductible health insurance for the participant.
6. The method for management of health care services according to claim 1, further comprising the step of depositing at least a portion of the premium of the participant in one of their individual accounts which is a savings account for obtaining health care services.

7. The method for management of health care services according to claim 6, further comprising the step of carrying over any remaining funds from a previous annual period in the savings account to discourage the participant from obtaining unneeded health care services.
8. The method for management of health care services according to claim 1, further comprising the step of depositing at least a portion of the premium of the participant in one of their individual accounts for loans to the participant and other participants who need to pay extraordinarily high deductibles.
9. The method for management of health care services according to claim 1, further comprising the step of depositing at least a fixed portion of the premium of the participant in one of their individual accounts for payment of authorized preventive health care services.
10. The method for management of health care services according to claim 9, further comprising the step of removing any remaining funds of the fixed portion from a previous annual period to encourage the participant to obtain authorized preventive health care.
11. The method for management of health care services according to claim 1, the plurality of individual accounts includes a first account, a second account, and a third account and further comprising the steps of depositing a first portion of the premium of the participant in the first account for obtaining high deductible health insurance for the participant, depositing a second portion of the premium of the participant in the second account which is a savings account for obtaining health care services, and depositing a third portion of the premium of the participant in the third account for payment of authorized preventive health care services.
12. The method for management of health care services according to claim 11, further comprising the steps of carrying over any remaining funds from a previous annual period in the second account to discourage the participant from obtaining unneeded health care services, and

removing any remaining funds from a previous annual period in the third account to encourage the participant to obtain preventive health care.

13. The method for management of health care services according to claim 1, further comprising step of providing identification of the authorized health care services on the debit card.

14. The method for management of health care services according to claim 1, further comprising step of managing any health care services which are not authorized health care services.

15. A method for management of health care services comprising, in combination, the steps of:

obtaining first, second, and third individual accounts for a participant at a financial institution;

obtaining high deductible health insurance for the participant;

predetermining authorized health care services;

predetermining authorized preventive health care services;

depositing a first portion of a premium of the participant in the first account for obtaining the high deductible health insurance;

depositing a second portion of the premium of the participant in the second account which is a savings account for obtaining the authorized health care services;

depositing a third portion of the premium of the participant in the third account for obtaining the authorized preventive health care services; and

providing a debit card to the participant to access money in the second and third accounts to make payments for the authorized health care services and the authorized preventive health care services.

16. The method for management of health care services according to claim 15, further comprising the step of predetermining authorized health care providers which can receive payment by the debit card for the authorized health care services and the authorized preventive health care services.

17. The method for management of health care services according to claim 16, further comprising the step of negotiating fixed payments with the authorized health care providers for the authorized health care services.

18. The method for management of health care services according to claim 15, further comprising the step of carrying over any remaining funds from a previous annual period in the second account to discourage the participant from obtaining unneeded health care services.

19. The method for management of health care services according to claim 15, further comprising the step of removing any remaining funds from a previous annual period in the third account to encourage the participant to obtain preventive health care.

20. The method for management of health care services according to claim 15, wherein the second account has first and second portions, wherein the first portion of the second account is the savings account for obtaining the authorized health care services, and further comprising the step of depositing at a fourth portion of the premium of the participant in the second portion of the second account for loans to the participant and other participants who need to pay extraordinarily high deductibles.

21. The method for management of health care services according to claim 15, further comprising step of providing identification of the authorized health care services on the debit card.

22. The method for management of health care services according to claim 15, further comprising step of managing any health care services which are not authorized health care services and authorized preventive health care services.

23. A method for management of health care services comprising, in combination, the steps of:

obtaining first, second, and third individual accounts for a participant at a financial institution;

obtaining high deductible health insurance for the participant;
predetermining authorized health care services;
predetermining authorized preventive health care services;
depositing a first portion of a premium of the participant in the first account for obtaining the high deductible health insurance;

depositing a second portion of the premium of the participant in the second account which is a savings account for obtaining the authorized health care services;

carrying over any remaining funds from a previous annual period in the second account to discourage the participant from obtaining unneeded health care services;

depositing a third portion of the premium of the participant in the third account for obtaining the authorized preventive health care services;

removing any remaining funds from a previous annual period in the third account to encourage the participant to obtain preventive health care;

providing a debit card to the participant to access money in the second and third accounts to make payments for the authorized health care services and the authorized preventive health care services;

predetermining authorized health care providers which can receive payment by the debit card for the authorized health care services and the authorized preventive health care services;
and

negotiating fixed payments with the authorized health care providers for the authorized health care services and the authorized preventive health care services.

24. The method for management of health care services according to claim 23, wherein the second account has first and second portions, wherein the first portion of the second account is the savings account for obtaining the authorized health care services, and further comprising the step of depositing at a fourth portion of the premium of the participant in the second portion of the second account for loans to the participant and other participants who need to pay extraordinarily high deductibles.

25. The method for management of health care services according to claim 23, further comprising step of providing identification of the authorized health care services on the debit card.

26. The method for management of health care services according to claim 23, further comprising step of managing any health care services which are not authorized health care services.